



CONCORD POLICE DEPARTMENT

219 Walden Street
P.O. Box 519
Concord Massachusetts 01742
Tel: (978) 318-3400 Fax: (978) 369-8420
Barry R. Neal Chief of Police



RECORDS / BACKGROUND CHECK FORM

** There is a minimum of a \$5.00 fee for any records or background check that requires copies of log or officer reports payable by Check or Money Order only made out to the Town of Concord.*

DATE: _____

NAME: _____

ADDRESS: _____

CITY/TOWN: _____ STATE: _____ ZIP: _____

DOB: _____ SSN#: _____

PHONE #: _____ EMAIL: _____

_____ I am requesting copies of any reports associated with my name.

_____ I am requesting a letter of good conduct/ no involvement.

I hereby authorize the Concord Police department to conduct a records check in order to complete the request as indicated above.

SIGNATURE: _____ DATE: _____